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| <b>PATENT APPLICATION FEE DETERMINATION RECORD</b><br>Substitute for Form PTO-875  |   |                                       |   | Application or Docket Number<br><b>10/591,193</b> | Filing Date<br><b>08/30/2006</b> | <input type="checkbox"/> To be Mailed |                               |           |                        |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
|--|---|---------------------------------------|---|---|----------------------------------|---------------------------------------|-------------------------------|-----------|------------------------|----------------------------|------------|----------------------------|--|------------|---|---------------------------------------|---|------------------|--------------|------------------------|--------------|------------------------|------------------------|-----------|----------|-----------|-----------|---|------------------------|------------------------|------------------------|------------------------------|------------------------------|-------|--|------|--------|--------|--------|-----|----------|---|-----|--|-----|--|--------|--|----------------------------------|------------|----|-----------|--|--------|--|--|-----------|-----------------------|--------|-----------------------|-----------------------|----|---|---|--|-------|--|-------|--|--|--|------------|--|--|------------|------------|----------------------------|--|-----------|---|--|---|------------------|-----------|------------------------|--|------------------------|---|-------|----|---|-----------|------------------------|-----------|------------------------|--|------------------------------|---|-------|-----|---|--------|--|--------|--|--|--|--|--|--|--|--------|--|----|--------|--|--|--|--|--|--|--|-----------------------|--|----|-----------------------|---|
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left; padding-bottom: 5px;">APPLICATION AS FILED – PART I</th> <th colspan="4" style="text-align: right; padding-bottom: 5px;">OTHER THAN<br/>SMALL ENTITY</th> </tr> <tr> <th style="text-align: center; padding-bottom: 5px;">(Column 1)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 2)</th> <th style="text-align: center; padding-bottom: 5px;">SMALL ENTITY <input type="checkbox"/></th> <th colspan="3" style="text-align: right; padding-bottom: 5px;">OR</th> <th style="text-align: center; padding-bottom: 5px;">SMALL ENTITY</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">FOR</td> <td style="padding: 5px;">NUMBER FILED</td> <td style="padding: 5px;">NUMBER EXTRA</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">FEE (\$)</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">FEE (\$)</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> BASIC FEE<br/>(37 CFR 1.16(a), (b), or (c))</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> SEARCH FEE<br/>(37 CFR 1.16(k), (l), or (m))</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> EXAMINATION FEE<br/>(37 CFR 1.16(o), (p), or (q))</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">N/A</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">TOTAL CLAIMS<br/>(37 CFR 1.16(i))</td> <td style="padding: 5px;">minus 20 =</td> <td style="padding: 5px;">*</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;">INDEPENDENT CLAIMS<br/>(37 CFR 1.16(h))</td> <td style="padding: 5px;">minus 3 =</td> <td style="padding: 5px;">*</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> APPLICATION SIZE FEE<br/>(37 CFR 1.16(s))</td> <td colspan="2" style="padding: 5px;">If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. 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See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |  | TOTAL |  | TOTAL |  | <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
| APPLICATION AS FILED – PART I  |   |                                       | OTHER THAN<br>SMALL ENTITY                  |   |                                  |                                       |                               |           |                        |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
| (Column 1)   | (Column 2)  | SMALL ENTITY <input type="checkbox"/> | OR  |   |                                  | SMALL ENTITY                          |                               |           |                        |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
| FOR  | NUMBER FILED  | NUMBER EXTRA                          | RATE (\$)                                   | FEE (\$)  | RATE (\$)                        | FEE (\$)                              |                               |           |                        |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
| <input type="checkbox"/> BASIC FEE<br>(37 CFR 1.16(a), (b), or (c))  | N/A   | N/A                                   | N/A   |   | N/A                              |                                       |                               |           |                        |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
| <input type="checkbox"/> SEARCH FEE<br>(37 CFR 1.16(k), (l), or (m))   | N/A   | N/A                                   | N/A   |   | N/A                              |                                       |                               |           |                        |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
| <input type="checkbox"/> EXAMINATION FEE<br>(37 CFR 1.16(o), (p), or (q))  | N/A   | N/A                                   | N/A   |   | N/A                              |                                       |                               |           |                        |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
| TOTAL CLAIMS<br>(37 CFR 1.16(i))   | minus 20 =  | *                                     | X \$ =                                      |   | X \$ =                           |                                       |                               |           |                        |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
| INDEPENDENT CLAIMS<br>(37 CFR 1.16(h))   | minus 3 =   | *                                     | X \$ =                                      |   | X \$ =                           |                                       |                               |           |                        |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
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| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))   |   |                                       |   |   |                                  |                                       |                               |           |                        |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
| <b>APPLICATION AS AMENDED – PART II</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left; padding-bottom: 5px;">(Column 1)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 2)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 3)</th> <th colspan="2" style="text-align: right; padding-bottom: 5px;">OTHER THAN<br/>SMALL ENTITY</th> </tr> <tr> <th style="text-align: center; padding-bottom: 5px;">AMENDMENT</th> <th style="text-align: center; padding-bottom: 5px;">CLAIMS<br/>REMAINING<br/>AFTER<br/>AMENDMENT</th> <th style="text-align: center; padding-bottom: 5px;"></th> <th style="text-align: center; padding-bottom: 5px;">HIGHEST<br/>NUMBER<br/>PREVIOUSLY<br/>PAID FOR</th> <th style="text-align: center; padding-bottom: 5px;">PRESENT<br/>EXTRA</th> <th style="text-align: center; padding-bottom: 5px;">SMALL ENTITY</th> <th style="text-align: center; padding-bottom: 5px;">OR</th> <th style="text-align: center; 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HARRIS/</b></p> |   |                                       |   |   |                                  |                                       | (Column 1)                    |           |                        | (Column 2)                 | (Column 3) | OTHER THAN<br>SMALL ENTITY |  | AMENDMENT  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | SMALL ENTITY | OR                     | SMALL ENTITY | 05/19/2009             | Total (37 CFR 1.16(i)) | * 24      | Minus    | ** 24     | = 0       | RATE (\$)   | ADDITIONAL<br>FEE (\$) | RATE (\$)              | ADDITIONAL<br>FEE (\$) |                              | Independent (37 CFR 1.16(h)) | * 3   | Minus  | ***3 | = 0    | X \$ = |        | OR  | X \$ 52= | 0   |     | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s)) |     |  |        |  | X \$ =                           |            | OR | X \$ 220= | 0  |        | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |  |           |                       |        | TOTAL<br>ADD'L<br>FEE |                       | OR | TOTAL<br>ADD'L<br>FEE   | 0   | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left; padding-bottom: 5px;">(Column 1)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 2)</th> <th style="text-align: center; padding-bottom: 5px;">(Column 3)</th> <th colspan="2" style="text-align: right; padding-bottom: 5px;">OTHER THAN<br/>SMALL ENTITY</th> </tr> <tr> <th style="text-align: center; padding-bottom: 5px;">AMENDMENT</th> <th style="text-align: center; padding-bottom: 5px;">CLAIMS<br/>REMAINING<br/>AFTER<br/>AMENDMENT</th> <th style="text-align: center; padding-bottom: 5px;"></th> <th style="text-align: center; padding-bottom: 5px;">HIGHEST<br/>NUMBER<br/>PREVIOUSLY<br/>PAID FOR</th> <th style="text-align: center; padding-bottom: 5px;">PRESENT<br/>EXTRA</th> <th style="text-align: center; padding-bottom: 5px;">RATE (\$)</th> <th style="text-align: center; padding-bottom: 5px;">ADDITIONAL<br/>FEE (\$)</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px; vertical-align: top;"></td> <td style="padding: 5px;">Total (37 CFR 1.16(i))</td> <td style="padding: 5px;">* </td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">** </td> <td style="padding: 5px;">= </td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> <td style="padding: 5px;">RATE (\$)</td> <td style="padding: 5px;">ADDITIONAL<br/>FEE (\$)</td> </tr> <tr> <td></td> <td style="padding: 5px;">Independent (37 CFR 1.16(h))</td> <td style="padding: 5px;">* </td> <td style="padding: 5px;">Minus</td> <td style="padding: 5px;">***</td> <td style="padding: 5px;">= </td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> </tr> <tr> <td></td> <td colspan="4" style="padding: 5px;"><input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">X \$ =</td> <td style="padding: 5px;"></td> </tr> <tr> <td></td> <td colspan="4" style="padding: 5px;"><input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">OR</td> <td style="padding: 5px;">TOTAL<br/>ADD'L<br/>FEE</td> <td style="padding: 5px;">0</td> </tr> </tbody> </table> |       |  |       |  |  |  | (Column 1) |  |  | (Column 2) | (Column 3) | OTHER THAN<br>SMALL ENTITY |  | AMENDMENT | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE (\$) | ADDITIONAL<br>FEE (\$) |  | Total (37 CFR 1.16(i)) | * | Minus | ** | = | RATE (\$) | ADDITIONAL<br>FEE (\$) | RATE (\$) | ADDITIONAL<br>FEE (\$) |  | Independent (37 CFR 1.16(h)) | * | Minus | *** | = | X \$ = |  | X \$ = |  |  | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s)) |  |  |  |  | X \$ = |  | OR | X \$ = |  |  | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |  |  |  |  | TOTAL<br>ADD'L<br>FEE |  | OR | TOTAL<br>ADD'L<br>FEE | 0 |
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|  | Independent (37 CFR 1.16(h))  | * 3                                   | Minus                                       | ***3  | = 0                              | X \$ =                                |                               | OR        | X \$ 52=               | 0                          |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
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|  | Total (37 CFR 1.16(i))  | *                                     | Minus                                       | **  | =                                | RATE (\$)                             | ADDITIONAL<br>FEE (\$)        | RATE (\$) | ADDITIONAL<br>FEE (\$) |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
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|  | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))  |                                       |   |   |                                  | X \$ =                                |                               | OR        | X \$ =                 |                            |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |
|  | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))  |                                       |   |   |                                  | TOTAL<br>ADD'L<br>FEE                 |                               | OR        | TOTAL<br>ADD'L<br>FEE  | 0                          |            |                            |  |            |   |                                       |   |                  |              |                        |              |                        |                        |           |          |           |           |   |                        |                        |                        |                              |                              |       |  |      |        |        |        |     |          |   |     |  |     |  |        |  |                                  |            |    |           |  |        |  |  |           |                       |        |                       |                       |    |   |   |  |       |  |       |  |  |  |            |  |  |            |            |                            |  |           |   |  |   |                  |           |                        |  |                        |   |       |    |   |           |                        |           |                        |  |                              |   |       |     |   |        |  |        |  |  |  |  |  |  |  |        |  |    |        |  |  |  |  |  |  |  |                       |  |    |                       |   |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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